

UNITED STATES BANKRUPTCY COURT
DISTRICT OF OREGON

In re _____) Case No. _____

Debtor(s) _____) NOTICE OF DEBTOR'S
) AMENDMENT OF MAILING LIST
) OR SCHEDULES D, E, F, G AND/OR H

I. FILING INSTRUCTIONS FOR DEBTOR(S):

- A. File this form to add or delete creditors from the mailing list and/or Schedules D, E, F, G or H, or change the amount or classification of a debt listed on schedules D, E, or F. An amendment [filing fee](#) is required.
- B. If filing in paper, you must also include a creditor mailing list with ONLY the NEW or DELETED creditors listed in the format set forth on [LBF #104](#). Be sure to label each set of changes (i.e., "Add", "Delete", etc.).
- C. If amending Schedules D, E, F, G or H, label them as "Supplemental" and include ONLY the NEW information, and file them with this notice.
- D. If amending Schedules D, E, or F, you must also file an updated Summary of Schedules ([Official Form #B6](#)), including page 2 if an individual.
- E. If the case is closed, you must also file a separate Motion to Reopen with the applicable [filing fee](#).
- F. To file an address change for a previously listed creditor, use [LBF #101C](#) instead of this form.

II. SERVICE INSTRUCTIONS FOR DEBTOR(S):

- A. **When adding creditors:** Serve each new creditor with a copy of this notice, and a copy of any of the following documents that have already been filed in this case:
 1. **(All chapters)** The Notice of the Meeting of Creditors that includes **all 9 digits** of any Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN).
 2. **(All chapters)** Each applicable amended schedule.
 3. **(All chapters)** When the time for filing a timely proof of claim or complaint under 11 USC §523(c) or §727 has expired, a separate notification that adding the creditor may not result in discharge of the debt. [Note: You must create this notification.]
 4. **(Chapter 7 or 11)** Any order, and any supplemental order, fixing time for filing a proof of claim form.
 5. **(Chapter 9, 11, 12, or 13)** (a) The notice of any pending confirmation hearing, all related documents required to be sent with that notice and, in a Chapter 13 case, the most recent proposed plan; or (b) the most recent confirmation order, the most recent confirmed plan, and, if a confirmed Chapter 11 plan, the approved disclosure statement related to the confirmed plan.
 6. **(Chapter 11, 12 or 13)** Any notice of modification of plan, including attachments, if time for objection has not expired.
 7. **(Chapter 9 or 11 only)** The names and addresses of the Chairperson and any attorney for each official Committee of Creditors or Equity Security Holders.
 8. **(Chapter 9 or 11)** The notice of any pending hearing on a proposed disclosure statement, with attachments.
- B. **When deleting creditors, changing a creditor status (e.g., nondisputed to disputed), or reducing a creditor's claim:** Serve each affected creditor with a copy of this notice, the applicable amended schedule(s), and the following:
 1. **(All chapters)** A notice to each deleted creditor that: (a) the creditor is being deleted and will not receive further notices unless the creditor files a written request with the court that includes the debtor's name, full case number, and the creditor's name and mailing address; and (b) if time has been fixed to file a proof of claim, the creditor should contact his/her attorney with any claims questions.
 2. **(Chapter 9 or 11)** A notice to each affected creditor that a proof of claim must be filed by the later of either (a) 30 days from the service date of this notice, or (b) the latest time fixed by the court.

III. CERTIFICATE OF COMPLIANCE:

The undersigned, who is the debtor or debtor's attorney, certifies that: (A) all applicable requirements above have been completed; AND (B) the attachments are true and correct [or were individually verified by the debtor(s)].

Dated: _____

Signature

Type or Print Signer's Name **AND** Phone No.

Debtor's Address & Taxpayer ID#(s) (last 4 digits)

United States Bankruptcy Court
District of Oregon

"Supplemental"

IN RE:

Crawford, Debra A.

Debtor(s)

Case No. 15-31963-pcm13

Chapter 13

AMENDED SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 502,000.00		
B - Personal Property	Yes	3	\$ 308,047.28		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	5		\$ 905,640.36	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		\$ 29,738.62	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	27		\$ 213,724.03	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	4			
I - Current Income of Individual Debtor(s)	Yes	2			\$ 7,800.00
J - Current Expenditures of Individual Debtor(s)	Yes	3			\$ 5,500.43
TOTAL		49	\$ 810,047.28	\$ 1,149,103.01	

United States Bankruptcy Court
District of Oregon

IN RE:Case No. 15-31963-pcm13Crawford, Debra A.Chapter 13

Debtor(s)

AMENDED STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 29,738.62
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 29,738.62

State the following:

Average Income (from Schedule I, Line 12)	\$ 7,800.00
Average Expenses (from Schedule J, Line 22)	\$ 5,500.43
Current Monthly Income (from Form 22A-1 Line 11; OR , Form 22B Line 14; OR , Form 22C-1 Line 14)	\$ 73,099.01

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 113,242.08
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 23,970.98	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 5,767.64
4. Total from Schedule F		\$ 213,724.03
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 332,733.75

IN RE Crawford, Debra A.

Case No. 15-31963-pcm13

Debtor(s)

(If known)

AMENDED SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. SSN Attorney General of the United States C/O Loretta Lynch, Dept. Of Justice 10th & Constitution NW Washington, DC 20530	X	Federal Tax Liens VALUE \$ 792,398.28				162,077.43	30,413.01
ACCOUNT NO. Internal Revenue Service Centralized Insolvency Operations POB 7346 Philadelphia, PA 19101-7346		Assignee or other notification for: Attorney General of the United States VALUE \$					
ACCOUNT NO. US Attorney For The District Of Oregon C/O Amanda Marshal, US Attorney 1000 SW 3rd Ave., Ste 600 Portland, OR 97204		Assignee or other notification for: Attorney General of the United States VALUE \$					
ACCOUNT NO. 7520 Summit Leasing, Inc. C/O Ken Mears PO Box 7 Yakima, WA 98907	X	Secured interest in various tanning equipment VALUE \$ 120,645.00				181,713.22	61,068.22

continuation sheets attached

Subtotal (Total of this page)	\$ 343,790.65	\$ 91,481.23
Total (Use only on last page)	\$	\$

(Report also on
Summary of
Schedules.)
(If applicable, report
also on Statistical
Summary of Certain
Liabilities and Related
Data.)

AMENDED SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL			UNSECURED PORTION, IF ANY
			CONTINGENT	UNLIQUIDATED	DISPUTED	
ACCOUNT NO.						
Farleigh Wada Witt Attorneys At Law 121 SW Morrison St., Suite 600 Portland, OR 97204		Assignee or other notification for: Summit Leasing, Inc.				
ACCOUNT NO.		VALUE \$				
ACCOUNT NO.		VALUE \$				
ACCOUNT NO.		VALUE \$				
ACCOUNT NO.		VALUE \$				
ACCOUNT NO.		VALUE \$				
ACCOUNT NO.		VALUE \$				
ACCOUNT NO.		VALUE \$				
Sheet no. 1 of 4 continuation sheets attached to Schedule of Creditors Holding Secured Claims		Subtotal (Total of this page)	\$		\$	
		Total (Use only on last page)	\$ 343,790.65		\$ 91,481.23	

(Report also on
Summary of
Schedules.)
(If applicable, report
also on Statistical
Summary of Certain
Liabilities and Related
Data.)

AMENDED SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

 Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

 Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

 Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

 Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

 Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

 Taxes and Certain Other Debts Owed to Governmental Units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

 Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

 Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

_____ continuation sheets attached

AMENDED SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Taxes and Other Certain Debts Owed to Governmental Units

(Type of Priority for Claims Listed on This Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. SSN Internal Revenue Service Centralized Insolvency Operations POB 7346 Philadelphia, PA 19101-7346		Federal taxes owed				0.00		
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
Sheet no. 1 of 1 continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims			Subtotal (Totals of this page)	\$	\$	\$		
			Total					
				\$				
			Total					
				\$				
			(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)					
			Total					
				\$				
			(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)					